PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Only 15 2 Cap 2												Dig.
CLAIMS AS FILED - PART ( (Column 1) (Column 2)								SMALL	-		OTHER	THAN
F	TOTAL CLAIM	5	T	Coloni		<u> </u>	<b>]</b> .	PATE	LFEE	OR	SMALL	
F	OR		MUMBER FILED		NUMBER EXTRA		-	BASIC FI		T <sub>OP</sub>	BASIC FEE	770.00
ī	OTAL CHARG	EABLE CLAIMS	250	inus 20a	2			XS 9=				
150	DEPENDENT	CLAIMS	9	3 minus 3 =				X43=		OR		1
M	VLTIPLE DEP	NOENT CLAIM	RESENT				A435	-	4OR	X86=		
	I the different	o in column 4 is						+145=	7	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
	374-05	CLAIMS AS AMENDED - PART II  Column 1) (Column 2) (Column 3)							ENTITY	OR	OTHER	
V		CLAIMS REMAINING		HIGH	EST	(Column 3)	1	J	ADDI-	7		ADDI-
F		AFTER .		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
AMENDMENT	Total	. 17	Niaus	2	) )	-0		XS 9¢		OR	نته الاحا	/
AME	Independent	1.3	Minus	-3		100		X43=/		OR	X86	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+290=	X
	. /									OF	TOTAL	
(0	(9-30-05 (Calumn 1) (Column 2) (Column 3)							VDOIT. FEE	<u> </u>	OR	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING		HIGHE	ST		ſ	<u> </u>	ADDI-	1 1		ADDI-
		AFTER AMENOMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	.12	Minus	- /	7	= \		X\$ 9=		OR	X\$18=	1 5,5,5
	Independent	• 2	Minus	3	•	= \(\frac{1}{2}\)		X43=	-	OŘ	.X86≈	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+290=	
	•	! !!!	3.4	•			L	+145=:	ļ	OR	TOTAL	•
			4.5	(Colum			À	DOIT. FEE	L	OR ,	ADDIT. FEE	
7		(Column 1)		_								
AMENDMENTC		REMAINING AFTER AMENDMENT	•	HIGHE NUMBI PREVIOU PAID R	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		= .		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		·=	ŀ				X86=	
7	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT (	MIALE		-	X43=		OR	V90=	
• #	If the entry in column 1 is less than the entry in column 2, write '0' in column 3.									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
T	he "Highest Num	ber Previously Paid	For (Total or	Independen	Q is the	highest number	foun	d in the ap	propriate bo	c in cot	umn 1.	

FORM PTO-475 (Rec. 1903)

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